



BOARD OF REALTY REGULATION
301 SOUTH PARK, ROOM 498
P.O. BOX 200513
HELENA, MT 59620-0513

OFFICE USE
APPROVED:
YES___ NO___
DATE_____

EDUCATION GRANT APPLICATION

PROVIDER INFORMATION:

Name of Course Provider _____

Tax I.D. # _____ Telephone # _____

Contact Person _____ Email Address _____

Address _____
(Street, P.O. Box) (City) (State) (Zip)

COURSE INFORMATION:

Course Date _____ Course Location _____

Course Name _____ Course # _____

Instructor Name _____ Instructor # _____

Course Name _____ Course # _____

Instructor Name _____ Instructor # _____

Course Name _____ Course # _____

Instructor Name _____ Instructor # _____

Dollar Amount Requested \$_____

ALL APPLICANTS MUST INCLUDE THE FOLLOWING INFORMATION AS AN ATTACHMENT:

► A narrative explanation of the target licensees. Why does this program need financial assistance? Why will the project not generate enough revenue to cover expenses?

► A budget for the course offering. Include costs of the facility, instructor, travel expenses, breaks, advertising, and any other expenses. Include revenue projections and sponsorship funds available.

The applicant understands and agrees that this course must be administered according to current Board of Realty Regulation rules which include rule 24.210.667(11) stating that the course must be open and available to all licensees.

The applicant understands and agrees to notify and send registration information to all licensees in the given target area.

The applicant understands that the Board may deny a request based on lack of funding, insufficient evidence of need, inappropriate course topic, unqualified instructor, or for cause.

Signature of Grant Applicant

Date